

CLASSIFICATION CONFIDENTIAL/SECURITY INFORMATION

CENTRAL INTELLIGENCE AGENCY
INFORMATION REPORT

COUNTRY North Korea
SUBJECT Biological and Medical Facilities

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SOURCE

1. A severe outbreak of cholera in North Korea in the spring of 1946 resulted in the formation of an epidemic prevention department within the Ministry of Health. At that time the North Korean Ministry of Health was totally unprepared for handling an epidemic and vaccine was lacking. The Seoul Vaccine Institute was approached for vaccine, and additional supplies were acquired from the USSR. It is very likely that Soviet assistance was received in the establishing of an epidemic division in Ministry of Health.
2. Typhus vaccine was produced at a plant in Munch'on, North Korea, at least until 1950. Biologicals were also produced at Hamhung, at Chongjin Medical College, at Heiju Sanatorium, and at Pyongyang Infectious Disease Sanatorium. An unknown antibiotic is produced at the present time from byproduct of glucose made at Ch'innamp'o Starch Plant.

Glucose made from corn at Ch'innamp'o Starch Plant is refined in Pyongyang into medically pure glucose solution.
3. The Japanese built a fertilizer and powder factory at Hungnam in the 1930's. Various chemicals were produced also, as well as glycerine, dye and nitrogen derivatives. Oil for glycerine was supplied from fish hauls.
4. The dean of the medical school of Kim Il Sung University, Pyongyang, is Dr Chai Myung Hak. He was formerly professor of anatomy at Severin Medical College, Seoul. Dr Lu Chung Bok, formerly professor of internal medicine at Seoul National University, is now in North Korean Army. Dr Lu Nam Soo, formerly a pediatrician in Seoul, is now in Ministry of Public Health, Pyongyang. Dr Chu Sung Soon, formerly associate professor of pathology at Seoul National University, is now vice-dean at Chongjin Medical College.
5. Availability of pharmaceuticals and drugs in North Korea is fair. It is doubtful if inoculation of suburban children is more than partially completed. Price of vaccines and sera is high, and usually afforded only by the government. Epidemic control is not adequate, though Soviet assistance would probably be forthcoming as in cholera outbreak of 1946. An epidemic would continue only from spring till late fall, however, due to severe cold in winter.

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